E7 16 '02

AMENDMENT TRANSMITTAL LETTER

CLIENT-MATTER NO .: 66797-087 (P-IX 3280)

SERIAL NO: 09/169,048 FILING DATE: October 8, 1998

EXAMINER: M. Baker

GROUP ART UNIT: 1639 CONFIRMATION NO.: 5187

INVENTION: RECEPTOR

METHOD FOR IDENTIFYING OPTIMAL BINDING LIGANDS TO A

TO: COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF MAILING BY "EXPRESS MAIL"

EXPRESS MAIL MAILING LABEL NUMBER: EL 985 983 284 US

DATE OF DEPOSIT: July 14, 2003

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSEE TO COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VIRGINIA 22313-1450.

Paul Luci Printed Name of Person Mailing Paper or Fee Signature of Person Mailing Paper or Fee

Transmitted herewith is a Response to the Office Action mailed January 13, 2003, in the above-identified application.

- Small Entity status of this application has been established under 37 CFR 1.27.
- _X_ Petition for Extension of Time is enclosed (in duplicate).
- Terminal Disclaimer with fee under 37 C.F.R. 1.20(d) is enclosed.
- X No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE		FEE		
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	36	-	36	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPEN- DENT CLAIMS	6	-	. 6	-	0	×	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM		YES			xno		\$140	\$280	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" $^{\circ}$ in this space.
- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.
- X Please charge my Deposit Account No. 502624 the amount of \$465.00 which covers the fee for a three-month extension of time. A duplicate copy of this sheet is enclosed.

Inventors: Huse and Freedman

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X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Deborah L. Cadena

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